

May 17, 2006

Dear Applicant:

We would like to introduce you to the Sandy Youth Court. This program is one of over a thousand youth courts throughout the country. Our program has been in existence since March of this year.

We are currently recruiting applicants for our 2006-2007 school year. The requirements are that you must be high school-aged, and attending a high school in Sandy and/or be a Sandy City resident.

Please fill out the attached application and return it to the Sandy City Justice Center or mail it back. We will be setting up interviews with the applicants during the month of June.

There will be a mandatory training in July, the cost will be \$30 per Youth Court member, which can be waived if financial circumstances warrant.

If you have any question, please feel free to contact me.

Sincerely,

Barbara Higgins, C.A.R.I. Program Youth Court Coordinator Sandy Police Department 10000 S. Centennial Parkway Sandy, UT 84070



210 West 10000 South Sandy, UT 84070 Phone: (801) 568-6059 E-mail: <u>Bhiggins@sandy.utah.gov</u>

Application For 2006-2007

Name:		Phone:	
Address: _			
Email:		Where did you hear about Sandy Yout	h Court?
	wer each of the following questions:		
1) Why	are you interested in being a membe	of the Sandy Youth Court?	
2) What	other extra curricular activities are	ou involved in?	
3) Are y	ou able to attend Youth Court every	second and fourth Tuesday of the mont	th?
	YES	NO	
4) Will y Cour	•	45pm and stay until 8pm each night of	f Youth
	YES	NO	

5)	Do you have any pending charges with Juvenile Court, or have you had any prior juvenile court involvement?
	YES NO
6)	Explain what confidentiality means and why it is so important for a Youth Court member.
7)	Why do you feel that it is a benefit for young people to stand before a jury of their peers to be sentenced?
8)	If you were to be on the jury and a classmate or friend was to be the person attending court to be sentenced, how would you handle the situation?
	of the above information is truthful and accurate. I allow the Sandy Police Department to do a background ck, and verify the above information.
Sign	Date:
	Date:
Sign	nature of Parent/ Guardian